POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*rhw*	67614	5/4/10
O.I.P.E. CLASSIFIER		12	5/11
FORMALITY REVIEW	LH	60105	6-24-10
RESPONSE FORMALITY REVIEW	LH	60105	7-15-10

INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected
=	.... Allowed		I	.... Interference
—	(Through numeral)... Canceled		A	.... Appeal
÷	.... Restricted		O	.... Objected

Claim		Date					
Final	Original	3/14/63	6/4/63	2/2/64			
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If more than 150 claims or 10 actions
staple additional sheet here

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